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are continued, and that cases of sickness receive early attention and diagnosis. The destruction or oiling of mosquito-breeding places is also done.

NICARAGUA.

Report from Bluefields, fruit port.

Acting Assistant Surgeon Layton reports as follows: Eight days ended April 8, 1905. Present officially estimated population, 3,500; 2 deaths. Prevailing diseases, malarial fever and tuberculosis; general sanitary condition of this port and the surrounding country during the week, good. There were more deaths than herein reported, but official records failed to show them.

Bills of health were issued to the following-named vessels:

Date.	Vessel.	Number of crew.	Number of passengers from this port.	Number of passengers in transit.	Pieces of baggage disinfected.
Apr. 2	John Wilson.....	18	2	a 1	0
5	Alabama.....	19	0	0	0
8	Condor.....		4	0	0

a Round trip.

PANAMA.

Reports from Colon—Mortality—Yellow fever in Colon and Panama—Breeding places for mosquitoes not generally destroyed—Sanitary conditions improving—Inspection of vessels.

Acting Assistant Surgeon Mohr reports, April 4, as follows:

During the week ended April 3, 1905, 11 deaths were officially reported, from the following causes:

Yellow fever, 1; bilious fever, 1; pulmonary tuberculosis, 1; cerebral fever, 1; convulsions, 1; locomotor ataxia, 1; heart disease, 2; bronchitis, 1; diarrhea, 2.

The case of yellow fever occurred in the person of a young Portuguese, three months resident on the Isthmus, who was admitted to the hospital on March 27 and treated as a suspect. Certain complications in the case rendered it doubtful of diagnosis until just before his death, which took place on April 2. The necropsy proved it to be yellow fever. The infection in this instance was also undoubtedly contracted in Colon. This is the third case contracted in Colon since March 1.

A new case of yellow fever was also reported in Panama on March 28, an American, who was admitted to Ancon Hospital on March 24. No deaths from the disease have occurred in Panama since March 12.

With the infection in Panama it was to be expected that sooner or later the disease would spread in Colon, where there has been a considerable influx of nonimmunes during the past six months or more. While few mosquitoes are seen or felt in exposed places during the prevalence of the northeast trade winds, the conditions for their breed-